



# Iowa Department of Human Services

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## INFORMATIONAL LETTER NO.1915-MC-FFS-D

**DATE:** June 22, 2018

**TO:** Iowa Medicaid Physicians, Nurse Practitioners, Dentists, Certified Nurse Midwives, Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), Hospitals, Podiatrists, Optometrists, PACE Providers

**APPLIES TO:** Managed Care, Fee-for-Service, Dental

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** Changes to the Electronic Health Record (EHR) Incentive Program

**EFFECTIVE:** Immediately

On April 24, 2018, the Centers for Medicare and Medicaid Services (CMS) released a [Notice of Proposed Rule Making under the Inpatient Prospective Payment System \(IPPS\) and the Long-Term Care Hospital \(LTCH\) Prospective Payment System \(PPS\)](#)<sup>1</sup>, which impacts the [Electronic Health Record \(EHR\) Incentive Program](#)<sup>2</sup>. CMS issued a [press release](#)<sup>3</sup> outlining how the EHR Incentive Program is affected. Below is an excerpt from the press release.

*“The proposed policies (released today) begin implementing core pieces of the government-wide [MyHealthEData initiative](#)<sup>4</sup> through several steps to strengthen interoperability or the sharing of healthcare data between providers. Specifically, CMS is proposing to overhaul the Medicare and Medicaid Electronic Health Record Incentive Programs (also known as the “Meaningful Use” program) to:*

- *make the program more flexible and less burdensome,*
- *emphasize measures that require the exchange of health information between providers and patients, and*
- *incentivize providers to make it easier for patients to obtain their medical records electronically.*

*To better reflect this new focus, we are re-naming the Meaningful Use program “Promoting Interoperability.” In addition, the proposed rule reiterates the requirement for providers to use the 2015 Edition of certified electronic health record technology in 2019 as part of demonstrating meaningful use to qualify for incentive payments and avoid reductions to Medicare payments. This updated technology includes the use of application programming*

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<sup>1</sup> <https://www.gpo.gov/fdsys/pkg/FR-2018-05-07/pdf/2018-08705.pdf>

<sup>2</sup> <https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/index.html>

<sup>3</sup> <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2018-Press-releases-items/2018-04-24.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=descending>

<sup>4</sup> <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2018-Press-releases-items/2018-03-06.html>

*interfaces (APIs), which have the potential to improve the flow of information between providers and patients. Patients could collect their health information from multiple providers and potentially incorporate all of their health information into a single portal, application, program, or other software. This can support a patient's ability to share their information with another member of their care team or with a new doctor, which can reduce duplication and provide continuity of care. In the proposed rule, CMS is requesting stakeholder feedback through a Request for Information on the possibility of revising Conditions of Participation to revive interoperability as a way to increase electronic sharing of data by hospitals."*

The EHR Incentive Program webpage on the DHS website has been updated to align and reflect the program name change. The webpage is now titled [Health Information Technology \(HIT\) and Promoting Interoperability \(PI\) Program](#)<sup>5</sup>.

If you have any questions regarding the Iowa Medicaid Promoting Interoperability (PI) Program, please call 515-974-2903 or email [imeincentives@dhs.state.ia.us](mailto:imeincentives@dhs.state.ia.us).

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<sup>5</sup> <http://dhs.iowa.gov/ime/providers/tools-trainings-and-services/medicaid-initiatives/EHRincentives>